

DECLARATION

IT (U.S.A.)	
ATTO-MEY'S DOCKET NO	כ
PD-9654	

•		and PO	WER OF ATTORNE	1	
					X ORIGINAL
	•				CONTINUATION
				,	DIVISIONAL
a t	elow named inventor, I declare that t elow, or a joint inventor If plural inve MODULAR COMPUTE	ntors are named below at 1-	true, that I believe that I is, of the invention entitled	um the original, first and sole in	
ich	is described and claimed in:		***************************************		,
	the attached specification or				
	the specification in application 5	Serial No.	filed .	as amended o	on
.56 erei	by state that I have reviewed and under ove. by claim foreign priority benefits und	erstand the contents of the abover Title 35. United States Coo	examination of this application of the second of the secon	n, including the claims, as amen-	ded by any amendment refe tor's certificate listed below
/•	also identified below any foreign app PRIOR FOREIGN APPLICATION(S)	lication for patent or Inventor's	s certificate having a filing	date before that of the applicat	ion on which priority is clair
_	COUNTRY	APPLICATION NUMBE	R DATE Month	OF FILING Day Year	PRIORITY CLAIMED UND 35 U.S.C. 11
- tu	- Carting				YES NO
_					YES NO
cl:	by claim the benefit under Title 35, L gims of this application is not disclose Secknowledge the duty to disclose the prior application and the nation	ed in the prior United States a material information as define	application in the manner ad in Title 37, Code of Fe	provided by the tirst paragraps	i of Trie 33, United States C
	cation Serial No.)		(Filing Date)		(St
ρĺ	cation Serial No.)	·	(Filing Date)		(SI
1	Palent and Trademark Office conne BERT SPENSLEY, Reg. No. 17,433; N. PERG, Reg. No. 28,488; PAUL L. G. 182; STANLEY A. BECKER, Reg. No. 18, 18, 19, 19, 19, 19, 19, 19, 19, 19, 19, 19	DIRE	CT TELEPHONE CALLS and telephone number	TO:	33; and HIDEO KODA, Reg
	Name of LAST NAME	FIRST NAME	NIDDLE NAME	Residence: CITY	STATE or COUNTRY
1	Inventor LOCHNER	SCOTT		PASADENA	CALIFORNIA
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2	Inventor BARTUR	MEIR		LOS ANGELES	CALIFORNIA
	Post Office Address				CITIZENSHIP
	Name of LAST NAME	FIRST NAME	MIDDLE NAME	Residence: CITY	STATE OF COUNTRY
3	Post Office Address				CITIZENSHIP
	Name of LAST NAME	FIRST NAME	MIDDLE HAME	Residence: CITY	STATE OF COUNTRY
•	Post Office Address		•		CITIZENSHIP
d f lh,	ner declare that all statements made urther that these statements were mu under Soction 1001 of Trite 18 of the ing thereon.	herein of my own knowledge ade with the knowledge that v United States Code, and that	are true and that all state willful false statements are t such willful false statem	ements made on information and d the like so made are punish ents may jeopardize the validity	d belief are believed to be able by fine or imprisonme of the application or any p
2	IGNATURE OF INVENTOR 1 A		SIGNATURE OF INV	INTOR 2/4	
Net A. Forhamer			1 Men	- Dartin	<u>; </u>
٥	ATF 12/261	90	DATE	12/22/90	
s	1 OF INVENTOR 3		SIGNATURE OF INV	ENTOR 4	
_	AVE		DATE		